Delaware's Health Insurance Marketplace: Update on Activities

Delaware Health Care Commission October 1, 2015

Secretary Rita Landgraf
Department of Health and Social Services





#### Agenda

- National Updates:
  - National Gains in Health Coverage Under the Affordable Care Act
  - Profile of Marketplace-Eligible Uninsured in U.S.
- Delaware Updates:
  - Outreach Efforts
  - Plan Management Update
  - 2016 QHP Highlights and Timeline
  - 2017 QHP Standards Workgroup Update
  - Key Dates
  - AB+C Marketing Campaign



### National Updates



#### National Gains in Health Coverage Under the ACA

- HHS Secretary Sylvia Burwell reported that 17.6 million uninsured people have gained coverage under the ACA since 2010 through the Marketplace, the Medicaid expansion or the individual market.
- Between October 2013 and mid-September 2015:
  - > 15.3 million adults gained health insurance coverage
  - ➤ U.S. uninsured rate declined from 20.3% to 12.6%, a 38% reduction (down 7.7 percentage points)
  - 4 million Latino adults gained coverage (11.5% drop in uninsured rate)
  - > 2.6 million African-American adults gained coverage (10.3% drop)
  - > 7.4 million white adults gained coverage (6% decline)
  - 3.2 million young adults aged 19-25 gained coverage, bringing to
     5.5 million number of young adults who gained coverage since
     2010 by staying on a parent's plan until age 26



#### Profile of Marketplace-Eligible Uninsured in U.S.

- 10.5 million uninsured Americans eligible for Marketplace coverage
- Nearly half are ages 18 to 34
- Nearly 40% have incomes between 139% and 250% of federal poverty level (about \$34,000 to \$61,000 a year for family of four)
- About one-third are members of minority groups, including 19% Hispanic, 14% African-American, and 2% Asian-American
- Robert Wood Johnson Foundation survey of 1,270 uninsured American adults found that:
  - About half had less than \$100 in savings
  - Nearly three out of five were confused about how premium tax credits work or do not know that they are available



### Delaware Updates



### Open Enrollment Season 3

- 2016 Open Enrollment begins Nov. 1 and runs through Jan. 31, 2016.
- Open to new enrollments and renewals.
- As of June 30: 23,163 Delawareans enrolled and had paid premiums; 84% receiving tax credits. Average tax credit = \$260/month
- If you don't have coverage in 2016, you will pay the higher of these two amounts:
  - 2.5% of your annual household income
  - > \$695 per person (\$347.50 per child under 18)
- For info: ChooseHealthDE.com
- To enroll: HealthCare.gov





#### Outreach

- Choose Health Delaware organizing meetings this month for Marketplace assisters, including agents & brokers, and hospitals.
- Goal is to cover Medicaid eligibility, enrollment and insurance requirements; establish referral process between Marketplace organizations; centralize contact information; and maintain consistent messaging.
- To facilitate enrollment process, agents and brokers will have dedicated line this year at Federal Call Center.
- Enrollment kick-off event being planned for late October.
- AB+C will provide a preview of the targeted and statewide marketing plans.



#### In-Person Assisters

- Navigators: Chatman LLC and Westside Family
  Healthcare received federal grants to help consumers
  understand the coverage options and financial
  assistance available at HealthCare.gov.
- FQHCs: Westside Family Healthcare, Henrietta Johnson Medical Center and La Red Health Center received federal grants to assist consumers.
- Agents & Brokers: State-certified insurance agents and brokers available to assist individuals and employers with their enrollments.
- Details available on ChooseHealthDE.com



### Plan Management Update



### Medical QHPs for Plan Year 2016—more choice for Delawareans

#### **Three Medical Issuers:**

- Highmark BlueCross BlueShield Delaware, Inc.
- Aetna Health, Inc.
- Aetna Life Insurance Company

Metal Level	Individual* 2016	Individual* 2015	SHOP 2016	SHOP 2015
Bronze	7	6	5	5
Silver	8	7	5	5
Gold	12	10	5	6
Platinum	1	1	0	0
Catastrophic	1	1	0	0
Total	29	25	15	16

#### Stand-alone Dental (SADP) QHPs for Plan Year 2016

- Four SADP Issuers have certified plans for Plan Year 2016
  - Delta Dental of Delaware, Inc.
  - Dentegra Insurance Company
  - Dominion Dental Services, Inc.
  - The Guardian Life Insurance Company of America

Actuarial Level	Individual 2016	Individual 2015	SHOP 2016	SHOP 2015
Low (70%)	6	8	3	10
High (85%)	6	3	6	5
Total	12	11	9	15



#### **Approved Rates for 2016 QHPs**

 September 29<sup>th</sup>: Insurance Commissioner Karen Weldin Stewart announced the approved rates of 2016 rates for Delaware's Qualified Health Plan (QHP) rates for Plan Year 2016.

Issuer	Individua	al Market	Small Group Market		
	Average Rate Increase (Requested)	Average Rate Increase (Approved)	Average Rate Increase (Requested)	Average Rate Increase (Approved)	
Aetna Health	16.9%	16.9%	-0.5%	-0.5%	
Aetna Life	16.8%	16.8%	-1.0%	-1.0%	
Highmark BCBSD	25.4%	22.4%	12.7%	12.7%	

- The rate charts for Marketplace plans will be posted to the Insurance Department's website on October 15<sup>th</sup>, and include a year-over-year comparison for those plans that were available in 2015, and in some cases, 2014.
- http://www.delawareinsurance.gov/health-reform/DEMarketplace.shtml

### 2016 QHPs in the Individual Marketplace



### 2016 Average Base Level Premium Rates\* – Individual Market (All Issuers) — PMPM\*\*

Metal Level	2015 Plan Level Base Premium Rate (Age 21)	2016 Plan Level Base Premium Rate (Age 21)	Year-to-Year Change (Dollars)	Year-to-Year Change (Percentage)
Bronze	\$197.38	\$227.86	\$30.48	15.4%
Silver	\$256.86	\$290.81	\$33.95	13.2%
Gold	\$290.20	\$347.44	\$57.24	19.7%
Platinum	\$343.12	\$421.59	\$78.47	22.9%
Catastrophic	\$171.10	\$202.73	\$31.63	18.5%

An individual's or family's premium rate will continue to be determined by the following factors:

- Consumer's household income and eligibility for APTC
- Age, family composition, tobacco use



<sup>\*</sup>non-tobacco rates

<sup>\*\*</sup>PMPM = per member per month

### 2016 QHPs and Base Premium Rates: Individual Market – <u>Highmark BCBSD</u>

An individual's or family's premium rate will continue to be determined by household income, eligibility for APTC, age, family size, and tobacco use.

Plan ID	Plan Name (PY2016)	Metal Level	2015 Individual Base Rate (Age 21)	2016 Individual Base Rate (Age 21)	Individual Rate Change (Dollars)	Individual Rate Change (Percentage)
76168DE0400001	Major Events Blue EPO 6850	Catastrophic	\$171.10	\$202.73	\$31.63	18.5%
76168DE0410010	Shared Cost Blue EPO 6000	Bronze	\$202.03	\$235.82	\$33.79	16.7%
76168DE0420001	Health Savings Embedded Blue EPO 6300 Rewards	Bronze	\$186.98	\$221.55	\$34.57	18.5%
76168DE0410008	Shared Cost Blue EPO 3000	Silver	\$235.31	\$296.77	\$61.46	26.1%
76168DE0420004	Health Savings Embedded Blue EPO 3400	Silver	\$232.56	\$276.78	\$44.22	19.0%

### 2016 QHPs and Base Premium Rates: Individual Market – <u>Highmark BCBSD</u>

Plan ID	Plan Name (PY2016)	Metal Level	2015 Individual Base Rate (Age 21)	2016 Individual Base Rate (Age 21)	Individual Rate Change (Dollars)	Individual Rate Change (Percentage)
76168DE0410002	Shared Cost Blue EPO 0	Gold	\$292.25	\$350.99	\$58.74	20.1%
76168DE0410012	Shared Cost Blue EPO 750	Gold	\$291.53	\$347.13	\$55.60	19.1%
76168DE0410006	Shared Cost Blue EPO 1000	Gold	\$282.50	\$353.13	\$70.63	25.0%
76168DE0410011	Shared Cost Blue EPO 1550	Gold	\$295.50	\$353.98	\$58.48	19.8%
76168DE0560001	Shared Cost Blue PPO 1500	Gold	\$286.83	\$348.42	\$61.59	21.5%
76168DE0560002	Shared Cost Blue PPO 1800 Rewards	Gold	\$288.28	\$347.57	\$59.29	20.6%
76168DE0420002	Health Savings Blue EPO 2000	Gold	\$279.97	\$334.73	\$54.76	19.6%
76168DE0410004	Shared Cost Blue EPO 300	Platinum	\$343.12	\$421.59	\$78.47	22.9%

### 2016 QHPs and Base Premium Rates: Individual Market – <u>Highmark BCBSD</u>

Highmark plans <u>new</u> to the Individual Marketplace for Plan Year 2016.

Plan ID	Plan Name	Metal Level	2016 Individual Base Rate (Age 21)
76168DE0630001	High Deductible Blue EPO 6850	Bronze	\$212.83
76168DE0410013	Shared Cost Blue EPO 4000	Silver	\$278.41
76168DE0640003	PCMH Blue EPO 2300	Silver	\$294.78
76168DE0640004	PCMH Blue EPO 2800	Silver	\$284.20
76168DE0640001	PCMH Blue EPO 900	Gold	\$356.83
76168DE0640002	PCMH Blue EPO 1200	Gold	\$336.37



### 2016 QHPs and Base Premium Rates: Individual Market – <u>Aetna Health, Inc.</u>

Plan ID	Plan Name (PY2016)	Metal Level	2015 Individual Base Rate (Age 21)	2016 Individual Base Rate (Age 21)	Individual Rate Change (Dollars)	Individual Rate Change (Percentage)
67190DE0080001	Aetna Bronze \$15 Copay HNOnly	Bronze	\$201.69	\$234.34	\$32.65	16.2%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOnly	Bronze	\$189.91	\$220.20	\$30.29	16.0%
67190DE0080004	Aetna Silver \$10 Copay HNOnly	Silver	\$255.79	\$297.23	\$41.44	16.2%
67190DE0080003	Aetna Gold \$10 Copay HNOnly	Gold	\$292.96	\$340.52	\$47.56	16.2%



### 2016 QHPs and Base Premium Rates: Individual Market – <u>Aetna Life Insurance Company</u>

Plan ID	Plan Name (PY2016)	Metal Level	2015 Individual Base Rate (Age 21)	2016 Individual Base Rate (Age 21)	Individual Rate Change (Dollars)	Individual Rate Change (Percentage)
29497DE0090001	Aetna Bronze \$15 Copay PPO	Bronze	\$207.89	\$242.44	\$34.55	16.6%
29497DE0090002	Aetna Bronze Deductible Only HSA Eligible PPO	Bronze	\$195.75	\$227.81	\$32.06	16.4%
29497DE0090004	Aetna Silver \$10 Copay PPO	Silver	\$263.66	\$307.49	\$43.83	16.6%
29497DE0090003	Aetna Gold \$10 Copay PPO	Gold	\$301.97	\$352.22	\$50.25	16.6%



### Mitigating the Impact of Rate Increases on Delawareans

- Health Insurance rate increases will affect the cost of coverage for many in Delaware, both in the Individual and Small Group markets.
- However, the impact of these increases will be mitigated for the approximately 84% of Delawareans who were eligible for premium tax credits and purchased plans through the Marketplace.
  - Premium tax credits offset the price that eligible consumers pay each month to maintain coverage



# 2016 Qualified Health Plans to be offered through the SHOP



## Average Base Level Premium Rates – SHOP (All Issuers)

Metal Level	2015 Plan Level Base Premium Rate (PMPM)	2016 Plan Level Base Premium Rate (PMPM)	Year-to-Year Change \$	Year-to-Year Change %
Bronze	\$250.48	\$270.48	\$20.00	8.0%
Silver	\$296.29	\$333.84	\$37.55	12.7%
Gold	\$359.75	\$400.67	\$40.92	11.4%

Actual premium rates will depend on what benefit plan the group chooses, when the group's contract renews, the age and family size for enrolling employees, and which members use tobacco.



### 2016 QHPs and Base Premium Rates: SHOP – <u>Highmark BCBSD Bronze Plans</u>

Plan ID	Plan Name	Metal Level	2015 Individual Base Rate	2016 Individual Base Rate	Individual Rate Change \$	Individual Rate Change %
76168DE0500004	Shared Cost EPO Basic \$6000/90	Bronze	N/A	\$285.88	N/A	N/A
76168DE0610002	Health Savings Embedded EPO HSA \$4750-90	Bronze	N/A	\$284.92	N/A	N/A
76168DE0610003	Health Savings Embedded EPO HSA \$6000-100	Bronze	N/A	\$286.36	N/A	N/A
76168DE0620001	HDHP Blue EPO \$6850	Bronze	N/A	\$276.32	N/A	N/A



### 2016 QHPs and Base Premium Rates: SHOP — Highmark BCBSD Silver Plans

Plan ID	Plan Name	Metal Level	2015 Individual Base Rate	2016 Individual Base Rate	Individual Rate Change \$	Individual Rate Change %
76168DE0430002	Shared Cost EPO Basic \$2000/75	Silver	\$306.05	\$339.27	\$33.22	10.9%
76168DE0590001	PCMH PPO \$2500-100	Silver	N/A	\$363.88	N/A	N/A
76168DE0590003	PCMH PPO \$3000-90	Silver	N/A	\$344.93	N/A	N/A
76168DE0610001	Health Savings Embedded EPO HSA Copay \$2750	Silver	N/A	\$339.76	N/A	N/A



### 2016 QHPs and Base Premium Rates: SHOP — Highmark BCBSD Gold Plans

Plan ID	Plan Name	Metal Level	2015 Individual Base Rate	2016 Individual Base Rate	Individual Rate Change \$	Individual Rate Change %
76168DE0430001	Shared Cost EPO Basic \$1000/75	Gold	\$369.14	\$406.34	\$37.20	10.1%
76168DE0510011	Health Savings EPO HSA \$1850/100	Gold	N/A	\$399.62	N/A	N/A
76168DE0580001	PCMH Blue EPO \$750- 100	Gold	N/A	\$429.05	N/A	N/A
76168DE0580002	PCMH Blue EPO \$1500- 100	Gold	N/A	\$413.05	N/A	N/A



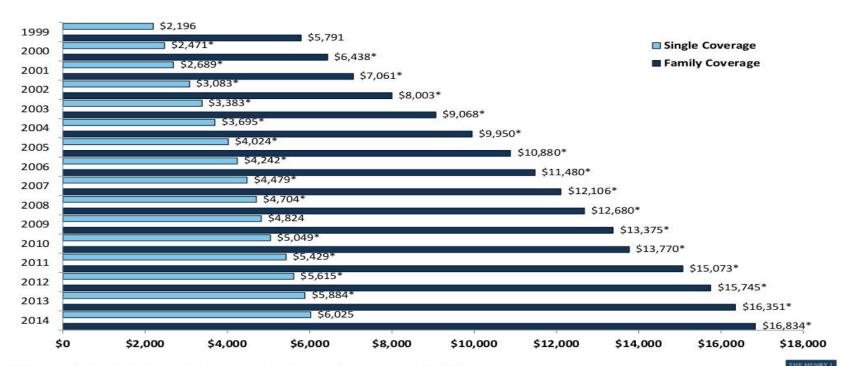
## 2016 QHPs and Base Premium Rates: SHOP – Aetna Health, Inc.

Plan ID	Plan Name	Metal Level	2015 Individual Base Rate	2016 Individual Base Rate	Individual Rate Change \$	Individual Rate Change %
67190DE0060001	DE Bronze HNOption 5000 80/50 HSA	Bronze	\$236.75	\$218.92	-\$17.83	-7.5%
67190DE0060003	DE Silver HNOption 3000 90/50	Silver	\$276.45	\$281.36	\$4.91	1.8%
67190DE0060002	DE Gold HNOption 1500 80/50	Gold	\$339.74	\$355.30	\$15.56	4.5%



#### Cost Trends in Employer-based Coverage

### Average Annual Premiums for Single and Family Coverage, 1999-2014



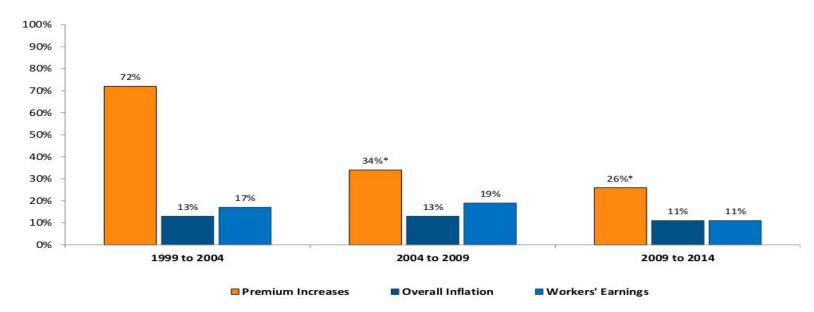
<sup>\*</sup> Estimate is statistically different from estimate for the previous year shown (p<.05). SOURCE: Kaiser/HRET Survey of Employer-Sponsored Health Benefits, 1999-2014.





### Cost Trends in Employer-based Coverage

### Average Premium Increases for Covered Workers with Family Coverage, 1999-2014



<sup>\*</sup> Premium Change is statistically different from previous period shown (p<.05).

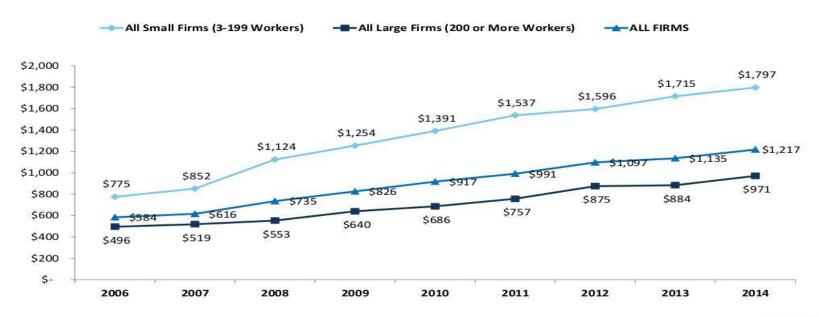
SOURCE: Kaiser/HRET Survey of Employer-Sponsored Health Benefits, 1999-2014. Bureau of Labor Statistics, Consumer Price Index, U.S. City Average of Annual Inflation (April to April), 2000-2014; Bureau of Labor Statistics, Seasonally Adjusted Data from the Current Employment Statistics Survey, 2000-2014 (April to April).





### Cost Trends in Employer-based Coverage

Among Covered Workers with a General Annual Health Plan Deductible for Single Coverage, Average Deductible, by Firm Size, 2006-2014



NOTE: Note: Average general annual health plan deductibles for PPOs, POS plans, and HDHP/SOs are for in-network services. SOURCE: Kaiser/HRET Survey of Employer-Sponsored Health Benefits, 2006-2014.





### QHP & Rate Review — Timeline for Review and Final Approval/QHP Certification

The following timeline is subject to change contingent on CMS revisions during the process.

Date	Milestone
May 16 - August 23	DOI conducts in-depth actuarial review of proposed rates
June 15 – July 15	DOI conducts Public Comment Period on proposed rates
July 16 – August 23	Commissioner conducts final review of proposed rates and makes determination on requested increases.
August 24-25	DOI submits QHP application data and State determinations on proposed rates to federal government (CMS) for review
August 26 – September 16	CMS reviews QHP application and state recommendations
September 17-18	CMS sends Certification Notices and QHP agreements to issuers
September 25	Issuers return QHP Agreements, including final plan list, to CMS
October 8-9	CMS sends Validation Notices confirming final plan list and countersigned QHP Agreements to Issuers
October 15	DOI posts QHP Plan rates on Department of Insurance website

### '17 QHP Standards - Workgroup Update

- The Workgroup convened to initiate the review process for Plan Year 2017.
- Workgroup will align goals of the State's healthcare reform with the expectations and guidelines established by the Center for Medicare and Medicaid Services, and Delaware's constituents.

Activity	Timeline
HCC/Marketplace leadership convenes QHP Standards Workgroup	9/15/2015
Workgroup reviews current QHP Standards and develops modifications to existing standards or new QHP standards	9/15/2015 - 11/4/2015
Workgroup submits initial list of recommended changes to existing QHP Standards to the HCC for review and comment	11/5/2015
HCC conducts Public Comment Period on proposed changes to QHP Standards	11/5/2015 - 11/18/2015
Workgroup reviews stakeholder feedback on proposed changes and develops final recommendations for HCC consideration	11/18/2015-11/20/2015
Marketplace leadership solicits HCC decision (approval/denial) on recommended changes	12/2/2015
HCC publishes Delaware QHP Standards on website	12/31/2015

Goal is to finalize the 2017 QHP standards for Plan Year by December 2015.



#### Key Dates

Date	Milestone
October 15, 2015	QHP Plan rates posted on DOI website
November 1, 2015	Open Enrollment begins for Plan Year 2016
December 15, 2015	Last day to enroll for coverage to begin Jan. 1
January 1, 2016	Insurance coverage begins for Plan Year 2016
January 15, 2016	Last day to enroll for coverage to begin Feb. 1
January 31, 2016	Open Enrollment ends for Plan Year 2016

- Consumers who experience qualifying life events -- for example, domestic violence eligibility, birth/adoption of a child, loss of minimum essential coverage, or aging out of parents' insurance at age 26 -- may enroll outside of open enrollment.
- ➤ Enrollment assisters and agents and brokers are available to assist with enrollments outside open enrollment.
- Visit <u>www.ChooseHealthDE.com</u> to find assistance.

Medicaid enrollment is open all year. Small businesses can enroll in SHOP anytime.

### AB+C Creative Intelligence

Open Enrollment 3: Marketing and Advertising Campaign



### Questions/Comments

- > Health Care Commission
- > Public

